MILWAUKEE COUNTY MHC REHABILITATION-HILLTOP

9455 WATERTOWN PLANK ROAD

MILWAUKEE	53226	Phone: (414) 257-7339	1	Ownership:	County
Operated from	1/1 To 12/31	Days of Operation:	365	Highest Level License:	FDDs
Operate in Cor	junction with	Hospital?	Yes	Operate in Conjunction with CBRF?	No
Number of Beds	Set Up and St	affed (12/31/03):	93	Title 18 (Medicare) Certified?	No
Total Licensed	l Bed Capacity	(12/31/03):	93	Title 19 (Medicaid) Certified?	Yes
Number of Resi	dents on 12/31	/03:	91	Average Daily Census:	91

Services Provided to Non-Residents		Age, Gender, and Primary Di	Length of Stay (12/31/03)				
Home Health Care	No			Age Groups	용	,	3.3
Supp. Home Care-Personal Care Supp. Home Care-Household Services	No No	Dorral appears   Dischilities		Under 65	100.0	1 10010	24.2 68.1
Day Services	No	Developmental Disabilities   Mental Illness (Org./Psy)	0.0		0.0		00.1
Respite Care	No	Mental Illness (Other)		1 75 - 84	0.0	•	95.6
Adult Day Care	No	Alcohol & Other Drug Abuse		85 - 94		  ***********	
Adult Day Health Care	Para-, Quadra-, Hemiplegic		05 = 94   95 & Over	0.0			
Congregate Meals	Cancer	0.0			1		
Congregate Meals No Home Delivered Meals No		Fractures		0.0   100.0		, ,	
Other Meals	No	Cardiovascular		65 & Over			
Transportation	No	Cerebrovascular	0.0			RNs	13.5
Referral Service	No	Diabetes		Gender	용	-	10.2
Other Services	No	Respiratory				Nursing Assistants,	10.2
Provide Day Programming for	INO	Other Medical Conditions		Male	75.8		64.8
Mentally Ill	Yes	•		Female	24.2	•	04.0
Provide Day Programming for	163		100.0			1	
Developmentally Disabled	Yes	 	100.0	l I	100.0		
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## Method of Reimbursement

		edicare itle 18			edicaid itle 19			Other		P	rivate Pay	<b>:</b>		amily Care			anaged Care	l		
Level of Care	No.	ᅇ	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	<del></del>	Per Diem (\$)	No.	୍ଚ	Per Diem (\$)	Total Resi- dents	- Of
Int. Skilled Care	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Skilled Care	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Intermediate				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Limited Care				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Personal Care				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Residential Care				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Dev. Disabled				91	100.0	196	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	91	100.0
Traumatic Brain In	j 0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Ventilator-Depende	nt 0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Total	0	0.0		91	100.0		0	0.0		0	0.0		0	0.0		0	0.0		91	100.0

MILWAUKEE COUNTY MHC REHABILITATION-HILLTOP

Nursing Care Required (Mean) \*

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Admissions, Discharges, and		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/03								
Deaths During Reporting Period										
				٩	Needing		Total			
Percent Admissions from:		Activities of	용	Ass	sistance of	% Totally	Number of			
Private Home/No Home Health	0.0	Daily Living (ADL)	Independent	One	Or Two Staff	Dependent	Residents			
Private Home/With Home Health	0.0	Bathing	54.9		33.0	12.1	91			
Other Nursing Homes	0.0	Dressing	65.9		22.0	12.1	91			
Acute Care Hospitals	0.0	Transferring	87.9		11.0	1.1	91			
Psych. HospMR/DD Facilities	100.0	Toilet Use	65.9		33.0	1.1	91			
Rehabilitation Hospitals	0.0	Eating	34.1		65.9	0.0	91			
Other Locations	0.0	* * * * * * * * * * * * * * * * * * *	*****	*****	*****	*******	*****			
Total Number of Admissions	7	Continence		용	Special Treat	ments	용			
Percent Discharges To:		Indwelling Or Extern	al Catheter	1.1	Receiving Re	espiratory Care	1.1			
Private Home/No Home Health	0.0	Occ/Freq. Incontinen	t of Bladder	22.0	Receiving T	racheostomy Care	0.0			
Private Home/With Home Health	0.0	Occ/Freq. Incontinen	it of Bowel	16.5	Receiving S	uctioning	0.0			
Other Nursing Homes	14.3				Receiving O	stomy Care	0.0			
Acute Care Hospitals	0.0	Mobility			Receiving T	ube Feeding	0.0			
Psych. HospMR/DD Facilities	0.0	Physically Restraine	ed	0.0	Receiving Me	echanically Altered Diets	22.0			
Rehabilitation Hospitals	0.0									
Other Locations	42.9	Skin Care			Other Residen	t Characteristics				
Deaths	42.9	With Pressure Sores		0.0	Have Advance	e Directives	0.0			
Total Number of Discharges		With Rashes		0.0	Medications					
(Including Deaths)	7	l			Receiving Pa	sychoactive Drugs	100.0			

Selected Statistics: This FDD Facility Compared to Similar Facilities & Compared to All Facilities

\* This FDD All Facility Facilities Facilties % Ratio % Ratio Occupancy Rate: Average Daily Census/Licensed Beds 97.8 89.6 1.09 87.4 1.12 Current Residents from In-County 100.0 33.5 2.98 76.7 1.30 Admissions from In-County, Still Residing 100.0 11.3 8.85 19.6 5.09 Admissions/Average Daily Census 7.7 21.3 0.36 141.3 0.05 Discharges/Average Daily Census 7.7 25.0 0.31 142.5 0.05 Discharges To Private Residence/Average Daily Census 0.0 11.4 0.00 61.6 0.00 Residents Receiving Skilled Care 0.0 0.0 0.0 0.00 88.1 0.00 Residents Aged 65 and Older 0.0 15.3 0.00 87.8 0.00 Title 19 (Medicaid) Funded Residents 100.0 99.3 1.01 65.9 1.52 Private Pay Funded Residents 100.0 99.3 1.01 65.9 1.52 Private Pay Funded Residents 100.0 99.4 1.01 65.5 15.40 Mentally Ill Residents 100.0 99.4 1.01 6.5 15.40 Mentally Ill Residents 100.0 0.3 0.00 33.6 0.00 General Medical Service Residents 0.0 0.3 0.00 33.6 0.00 Impaired ADL (Mean)\* 21.8 53.1 0.41 49.4 0.44 Psychological Problems 100.0 50.1 2.00 57.4 1.74 Nursing Care Required (Mean)\* 2.9 11.0 0.26 7.3 0.39 \_\_\_\_\_\_

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